

SENATE BILL No. 352

DIGEST OF INTRODUCED BILL

Citations Affected: IC 12-7-2-189.8; IC 12-15-14-2.

Synopsis: Target health facility occupancy rates. Establishes target statewide average occupancy rates for health facilities that receive Medicaid funding. Allows the office of Medicaid policy and planning (OMPP) to implement statewide policies to achieve these occupancy rates. Requires OMPP to report specified information to the select joint commission on Medicaid oversight.

Effective: July 1, 2003.

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January 16, 2003, read first time and referred to Committee on Health and Provider Services.

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First Regular Session 113th General Assembly (2003)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2002 Regular or Special Session of the General Assembly.

SENATE BILL No. 352

A BILL FOR AN ACT to amend the Indiana Code concerning Medicaid.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 12-7-2-189.8 IS ADDED TO THE INDIANA
- 2 CODE AS A **NEW** SECTION TO READ AS FOLLOWS
- 3 [EFFECTIVE JULY 1, 2003]: **Sec. 189.8. "Target statewide average**
- 4 **occupancy rate", for purposes of IC 12-15-14, means the goal for**
- 5 **the percentage of occupied licensed health facility beds in the state.**
- 6 SECTION 2. IC 12-15-14-2, AS AMENDED BY P.L.160-2001,
- 7 SECTION 2, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
- 8 JULY 1, 2003]: Sec. 2. (a) Payment of nursing facility services shall be
- 9 determined in accordance with 42 U.S.C. 1396a(a)(13)(A) and any
- 10 other applicable federal statutes or regulations governing such
- 11 payments.
- 12 (b) The office may not require a provider to submit non-Medicaid
- 13 revenue information in the provider's annual historical financial report.
- 14 Non-Medicaid revenue information obtained by Medicaid auditors in
- 15 the course of their audits may not be used for public reporting
- 16 purposes.
- 17 (c) The office may only request complete balance sheet data that



applies directly to the provider's facility. Complete balance sheet data acquired by the office under this subsection:

- (1) is confidential; and
 - (2) may only be disclosed:
 - (A) in the aggregate; or
 - (B) for an individual facility;
- if the office removes all non-Medicaid data.

(d) The following target statewide average occupancy rates apply to a health facility that is licensed under IC 16-28 and receives Medicaid payments:

- (1) For calendar year 2004, the target statewide average occupancy rate is seventy-five percent (75%).**
- (2) For calendar year 2005, the target statewide average occupancy rate is eighty-five percent (85%).**
- (3) After December 31, 2005, the target statewide average occupancy rate is ninety percent (90%).**

(e) The office may adopt statewide policies to facilitate achievement of the target statewide average occupancy rate. These policies may include changing the Medicaid reimbursement system.

(f) The office of the secretary shall adopt rules under IC 4-22-2 to implement the reimbursement system required by this section.

SECTION 3. [EFFECTIVE JULY 1, 2003] (a) As used in this SECTION, "office" refers to the office of Medicaid policy and planning established by IC 12-8-6-1.

(b) Beginning in 2004, the office shall report the following to the select joint commission on Medicaid oversight established by IC 2-5-26-3 not later than October 31 of each year:

- (1) A summary of any Medicaid program policy that was implemented the preceding calendar year in order to facilitate achievement of the target statewide average occupancy rate described in IC 12-15-14-2, as amended by this act.**
- (2) The most current statewide average health facility occupancy rates following the implementation of a policy described in subdivision (1).**
- (3) Any Medicaid program policy change that the office is considering to achieve the target statewide average occupancy rate described in IC 12-15-14-2, as amended by this act.**

(c) This SECTION expires December 31, 2006.

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